


WESTON - EPA REGION 6 START-3 Contract
Removal Assessment
SITE HEALTH AND SAFETY PLAN – Lane Plating

1. SITE INFORMATION

Prepared by: Jose Ojeda	TDD: 5/WESTON-042-16-004	WO: 20406.012.005.0992.01	Date Prepared: 4/1/2016
FPN# N/A		CERCLA ID# N/A	
START PTL (Name/ Number): Jose Ojeda 619-417-3298	START FSO(Name/ Number): Sean Gavlas 609-433-8434	OSC R1 (Name/ Number): William Rhotenberry	Alternate OSC (Name/Number): N/A
Site Address: Lane Plating Works, Inc., 5322 Bonnie View Rd, Dallas, Dallas County, Texas 75216			
Site History: <p>The site is owned by Stag Management, Inc. (DBA Lane Plating Works, Inc.), a former electroplating facility that currently contains an unknown number of drums and vats potentially containing electroplating wastes. Common electroplating process waste includes acids, bases, flammables, oxidizers, cyanides, chromium-contaminated solids (sludge) and liquids, and Resource Conservation Recover Act (RCRA) non-hazardous solids and liquids. The number and condition of the drums and vats containing the electroplating waste is not known at this time. Contaminants of concern for the site include but are not limited to heavy metals, cyanide, and other constituents associated with the plating process.</p>			
START Scope of Work: <p>(1) Mobilize and demobilize to/from the site (2) Collection, review, and evaluation of site history, site operations, and site features (3) Collection and laboratory analysis of samples of on-site soils and for site-related contaminants (4) Collection and laboratory analysis of aqueous samples for waste characterization</p>			

2. SITE HEALTH AND SAFETY PLAN REVIEW AND APPROVAL

	Name	Signature	Date
Reviewed by: FSO/ SO/DSM/CHS	Sean Gavlas		
Approved by: Site Manager			
Reviewed and Approved by: PTL/Scope of Work Leader	Jose Ojeda		4-11-2016

The information contained in this document is the property of Weston Solutions, Inc. and may not be used or reproduced in any form without the written permission of Weston Solutions, Inc.

3. TRAINING REQUIREMENTS (Attach Personnel's EHS Track Training/Medical Summary Page)

<input checked="" type="checkbox"/>	40-Hour HAZWOPER -	<input checked="" type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input checked="" type="checkbox"/>	8-Hour Annual Refresher-	<input checked="" type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input checked="" type="checkbox"/>	Blood Borne Pathogen-	<input checked="" type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input checked="" type="checkbox"/>	CPR -	<input checked="" type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input checked="" type="checkbox"/>	First Aid-	<input checked="" type="checkbox"/> Required for ALL personnel	<input checked="" type="checkbox"/> Required for FSO/PTL only
<input checked="" type="checkbox"/>	SHSC/FSO Training -	<input type="checkbox"/> Required for ALL personnel	<input checked="" type="checkbox"/> Required for FSO/PTL only
<input type="checkbox"/>	10-Hr Construction Safety -	<input type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input type="checkbox"/>	30-Hr Construction Safety-	<input type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input type="checkbox"/>	Confined Space Training-	<input type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input type="checkbox"/>	Competent Person Fall Prevention and Protection	<input type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input type="checkbox"/>	Competent Person Trenching and Excavation-	<input type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input checked="" type="checkbox"/>	Function Specific Dangerous Goods Shipping	<input type="checkbox"/> Required for ALL personnel	<input checked="" type="checkbox"/> Required for FSO/PTL only
<input checked="" type="checkbox"/>	Site-Specific Training, Specify: _Site HAZCOM__	<input checked="" type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input type="checkbox"/>	Site-Specific Training, Specify: _____	<input type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input type="checkbox"/>	Site-Specific Training, Specify: _____	<input type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only
<input type="checkbox"/>	Other: _____	<input type="checkbox"/> Required for ALL personnel	<input type="checkbox"/> Required for FSO/PTL only

4. MEDICAL SURVEILLANCE REQUIREMENTS (Attach Personnel's EHS Track Training/Medical Summary Page)

☒ Baseline/annual physical examination to include spirometry with occupational physician clearance.
☒ Required for ALL personnel ☐ Required for FSO/PTL only ☐ Other:

☐ Two-Year DOT physical examination with physician certification (DOT card).

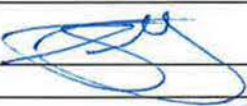

☒ Annual Fit Test
☐ Qualitative Fit Test ☐ Required for personnel wearing Level B/C PPE ☐ Required for FSO/PTL only
☒ Quantitative Fit Test ☒ Required for ALL personnel ☐ Required for FSO/PTL only

☒ EPA periodic drug screening ☒ Required for ALL personnel ☐ Required for FSO/PTL only

☐ Site-specific medical monitoring protocol, Specify: __Level B operations if ambient air temperature warrant
medical monitoring see appropriate FLD for heat stress ☐ Required for ALL personnel ☐ Required for FSO/PTL only

☐ Asbestos worker medical exam and physician clearance
☐ Required for ALL personnel ☐ Required for FSO/PTL only

5. **SITE SECURITY ASSESSMENT**

SITE SECURITY ASSESSMENT FORM	
Site Description	
<ul style="list-style-type: none"> Client: USEPA Region 6 Site Name: Lane Plating Address, City, & State: 5322 Bonnie View Rd, Dallas, Texas Project Start Date & Estimated Completion Date: 04/11/2016 - 04/15/2016 	
Communication with SITE Point of Contact (POC)	
<ul style="list-style-type: none"> Site POC Name and Contact Information: Dorothy Lewis – TCEQ DFW Office Date Contacted: 03/17/2016 Site Setting: Commercial, Industrial, Residential, Other: Commercial with adjacent residential properties Conversation Details: TCEQ requesting EPA assistance with removal assessment 	
Threat Indicators	
<ul style="list-style-type: none"> http://www.spotcrime.com – Website that allows you to search by state, city, and plug in address. List the number of arrests, assaults, burglary, robbery, shootings, and theft in your general area: AR – 0 AS – 2 BG – 5 ROB – 0 SHT – 3 TFT – 5 Other relevant details: No items were found in the immediate area adjacent to the site. The listed assault, burglary, theft, and shooting incidents were identified in areas north (~1km) and south (~1km) of the site location. 	
Security Countermeasures	
<ul style="list-style-type: none"> Will conduct field work during daylight hours: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Buddy System at ALL times: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If no, why? Routine phone check-ins with PM or PC SO: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Badges/Weston identification required at all times: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Site fenced/secure: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Site security guards/hired protection: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Other: _____ 	
Closest Police Station / Emergency Services	
<ul style="list-style-type: none"> Police station location and phone number: Dallas PD- Did you contact the police station: <input type="checkbox"/> YES (Required for High Risk) <input checked="" type="checkbox"/> NO If so, conversation details: _____ 	
Approval	
Security Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L Field Safety Officer Name: Sean Gavlas Signature:  PM Name: Jeffrey Criner Signature: _____ Safety Officer Name: Samuel Cheek Signature:  Elevated to Division Safety Manager: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO: If no, why not? The site is a low security threat.	

6. TASKS/DURATION (Fill in as appropriate)

Tasks	Duration (Hours/Days)	PPE Level
<input checked="" type="checkbox"/> Mobilization and Demobilization	Task 1	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input checked="" type="checkbox"/> D
<input type="checkbox"/> Perimeter Recon		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input checked="" type="checkbox"/> Logbook Documentation	Task 2	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input checked="" type="checkbox"/> D
<input checked="" type="checkbox"/> Photo Documentation	Task 2	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input checked="" type="checkbox"/> D
<input checked="" type="checkbox"/> Response Manager / Data Management	Task 2	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input checked="" type="checkbox"/> D
<input type="checkbox"/> Decontamination		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/> Air Monitoring		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/> Air Sampling		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input checked="" type="checkbox"/> Soil/Solid Sampling	Task 3	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input checked="" type="checkbox"/> D
<input checked="" type="checkbox"/> Water/Liquid Sampling	Task 3	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input checked="" type="checkbox"/> D
<input type="checkbox"/> Drum Sampling		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/> AST/UST/Large Container Sampling		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/> HAZCAT		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/>		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/>		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/>		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/>		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
<input type="checkbox"/>		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D

7. PHYSICAL HAZARDS

- ☒ Buddy System – The buddy or line of sight system is mandatory for all site personnel.
- ☒ Heat Stress – The FSO shall generally be guided by the Weston OP in determining work/rest periods. Fluids shall be available at all times and encouraged during rest periods.
- ☒ Cold Stress – The FSO shall generally be guided by the Weston OP in determining work/rest periods. Workers shall be provided with adequate warm clothing, rest opportunities and exposure protection. Warm and/or sweet fluids shall also be provided during rest periods.
- ☒ Precipitation/Inclement Weather – Personnel should be aware of lightning, the increased risk of slips and falls on wet surfaces, and exposure effects caused by wet clothing. Personnel should dress appropriately.
- ☐ Lighting – Fixed or portable lighting shall be maintained for dark areas or work after sunset to ensure that sufficient illumination is provided.
- ☐ Work Near Water – All personnel working in boats, on docks or generally within 10 feet of water deeper than 3 feet shall wear approved personal flotation devices (PFDs) or work vests and wading boots as appropriate.
- ☒ High Noise Levels – Hearing protection shall be used in high noise areas (exceeding 85 dBA – generally where noise levels require personnel to raise their voices to be heard) as designated by the FSO.
- ☐ Electrical Hazards – Electrical hazards should be identified on the site work zone map and marked out as appropriate. All electrical equipment should be used with a ground fault circuit interrupter (GFCI).
- ☐ Trip Hazards – Open manholes, pits, trenches or similar hazards should be noted on the site map and should be marked off on site as appropriate.

- ☐ Helicopter/Airplane Operations – Pilots shall provide safety briefings for all passengers.
- ☒ Terrain (Slips, Trips and Falls) – All personnel will exercise due caution when walking through areas of uneven terrain and undergrowth to ensure proper footing.
- ☒ Underground/Overhead Utilities – All underground utilities must be marked out prior to conducting intrusive activities. At least 15 feet of distance must be maintained with overhead utilities.
- ☐ Confined Spaces – Confined spaces will not be normally entered by response personnel. If a confined space is to be entered, a specific confined space entry work permit will be developed for that operation.
- ☒ Drum Handling – Drums must be handled in accordance with 29 CFR 1910.120. Containers must be labeled and constructed in accordance with EPA (40 CFR 264-265, and 300), and DOT (49 CFR 171-178) regulations. Temporary holding/staging areas for drums and other containers shall be constructed to contain spillage, runoff or accidental release of materials. Manual lifting and handling of drums shall be kept to a minimum. To the extent possible, mechanical devices, drum slings or other mechanical assist devices designed for that purpose should be used.
- ☒ Motor Vehicles – Drivers shall maintain a safe speed at all times and shall not be allowed to operate vehicles in a reckless manner. Seat belts will be worn. In backing situations where the rear of the vehicle cannot be clearly seen, one person shall act as a ground guide to assist the driver. In situations where ground clearance and soil conditions are not known, one person shall dismount and act as a guide. (Also See Next Page)

Vehicle Use Assessment and Selection
<p><i>Driving is one of the most hazardous and frequent activities for WESTON Employees. The most appropriate type vehicle(s) authorized for use on this project is/are:</i></p> <ol style="list-style-type: none"> 1. Pick-up truck 2. SUV
<p><i>The following Project Team Member's qualifications and experience in driving these types of vehicles was evaluated and found to be acceptable (indicate vehicle type(s) number next to employee name). Team Member's driving the EPA START box truck and/or ambulance need to have a road test and DOT physical clearance every 2 years.</i></p> <ol style="list-style-type: none"> 1. Jose Ojeda (1,2) 2. Sean Gavlas (1,2) 3. Joe Bohn (1,2) 4. Oscar Garcia (1,2)
<p><i>The project site was evaluated and a Traffic Control Plan <input type="checkbox"/> is required <input checked="" type="checkbox"/> is not required.</i></p> <p><i>If required, the Traffic Control Plan can be found in Attachment A.</i></p>

8. BIOLOGICAL HAZARDS

- ☒ Insect Stings – Hornet, wasp or bee stings, mosquito. Personnel should avoid the nesting areas of these insects. Personnel who are allergic to these insects should carry bee sting kits. Personnel may find repellants containing DEET effective in keeping these insects away.

- ☒ Poisonous Spiders – Black widow or brown recluse. Wear gloves when working in areas where these spiders may be present. If bitten, seek medical attention immediately.
- ☐ Ticks – Personnel should wear Tyvek® when working in wooded areas as a precaution. Barring this, personnel should wear light colored clothing and tuck pants into socks. Personnel should also wear a repellent containing DEET. Personnel should use the buddy system and perform a tick check after exiting wooded areas. Suspected bites should be reported immediately.
- ☒ Animal Bites – Personnel should use extreme caution when in contact with strange animals. If bitten, seek medical attention immediately.
- ☒ Snake Bites – Personnel should use extreme caution when working in areas known to be inhabited by snakes. Snake leggings or chaps should be worn as a precaution. If bitten, seek medical attention immediately.
- ☒ Poisonous Plants – Personnel should use caution when working in wooded areas. Tyvek® suits may be worn as a precaution. All personnel should wear Ivy Block.
- ☐ Etiological Hazards – Personnel should use caution when working in areas that may contain etiologic hazards. Tyvek® suits and gloves may be worn as a precaution. All personnel should frequently wash their hands.

9. RADIOLOGICAL HAZARDS

- ☐ Ionizing Radiation – Any encounter with ionizing radiation requires the support from a Certified Health Physicist (CHP). All START personnel must wear a personal dosimeter which should consist of a TLD and/or Self-Reading Dosimeter (SRD).
- ☐ Non-Ionizing Radiation – To the extent possible personnel should maintain a minimum distance of 30 feet from devices emitting radio or microwaves.
- ☒ UV Light Exposure – Personnel should dress so as to cover as much exposed skin as possible. Personnel should use a sunscreen with a protection factor (PF) of 15 or greater and should wear tinted safety glasses.

10. CHEMICAL HAZARDS TO PERSONNEL

The following chemicals are known or suspected to be at this site: Source: X:\TeamLink START-3\Review\Lane Plating Works Removal Assessment - 20406.012.005.0992.01\TCEQ- Analytical Results.xlsx

Chemical Contaminants of Concern		Chemicals/Materials brought on-site	
Chemical Name	Quantity/Concentration/ PEL/ IDLH	Chemical Name	Quantity
Cadmium	20.6 – 205.0 mg/kg	Fire Extinguisher	10 lb
Chromium	147.0 – 7,580.0 mg/kg	Nitric Acid	< 1 liter
Lead	110.0 – 2,000.0 mg/kg		
Mercury	4.1 – 46.4 mg/kg		
Stripping metal in acid	Unknown		
Sodium hydroxide	Unknown		
Sulfuric acid	Unknown		
Copper cyanide	Unknown		
Nitric acid	Unknown		
Zinc cyanide	Unknown		
Nickel sulfate	Unknown		
Chromic acid	Unknown		
Electroplating wastewater	Unknown		

Web Links

1. NIOSH Pocket Guide (Electronic Version) - <http://www.cdc.gov/niosh/npg/npgname-a.html>
2. Vermont SIRI SDS Collection - <http://hazard.com/SDS/>

HEALTH AND SAFETY EVALUATION

WESTON FLDs - Maintained on FSO's/PTL's Computer

Physical Hazard Condition	Physical Hazard	Attach OP	WESTON OP Titles
Loud noise	Hearing loss/disruption of communication	<input type="checkbox"/>	Section 7.0 - ECH&S Program Manual Occupational Noise & HC Program
Inclement weather	Rain/humidity/cold/ice/snow/lightning	<input checked="" type="checkbox"/>	FLD02 - Inclement Weather
Steam heat stress	Burns/displaced oxygen/wet working surfaces	<input type="checkbox"/>	FLD03 - Hot Process - Steam
Heat stress	Burns/hot surfaces/low pressure steam	<input type="checkbox"/>	FLD04 - Hot Process - LT3
Ambient heat stress	Heat rash/cramps/exhaustion/heat stroke	<input checked="" type="checkbox"/>	FLD05 - Heat Stress Prevention/Monitoring
Cold stress	Hypothermia/frostbite	<input checked="" type="checkbox"/>	FLD06 - Cold Stress
Cold/wet	Trench/paddy/immersion foot/edema	<input checked="" type="checkbox"/>	FLD02 - Inclement Weather
Confined spaces	Falls/burns/drowning/engulfment/electrocution	<input type="checkbox"/>	FLD08 - Confined Space Entry
Industrial Trucks	Fork Lift Truck Safety	<input type="checkbox"/>	FLD09 - Powered Industrial Trucks
Improper lifting	Back strain/abdomen/arm/leg muscle/joint injury	<input checked="" type="checkbox"/>	FLD10 - Manual Lifting/Handling Heavy Objects
Uneven surfaces	Vehicle accidents/slips/trips/falls	<input checked="" type="checkbox"/>	FLD11 - Rough Terrain
Poor housekeeping	Slips/trips/falls/punctures/cuts/fires	<input checked="" type="checkbox"/>	FLD12 - Housekeeping
Structural integrity	Crushing/overhead hazards/compromised floors	<input checked="" type="checkbox"/>	FLD13 - Structural Integrity
Hostile persons	Bodily injury	<input checked="" type="checkbox"/>	FLD14 - Site Security
Improper cylinder. handling	Mechanical injury/fire/explosion/suffocation	<input type="checkbox"/>	FLD16 - Pressure Systems - Compressed Gases
Water hazards	Poor visibility/entanglement/drowning/cold stress	<input type="checkbox"/>	FLD17 - Diving
Water hazards	Drowning/heat/cold stress/hypothermia/falls	<input type="checkbox"/>	FLD18 - Operation and Use of Boats
Water hazards	Drowning/frostbite/hypothermia/falls/electrocution	<input type="checkbox"/>	FLD19 - Working Over Water
Vehicle hazards	Struck by vehicle/collision	<input checked="" type="checkbox"/>	FLD20 - Traffic
Explosions	Explosion/fire/thermal burns	<input type="checkbox"/>	FLD21 - Explosives
Moving mechanical parts	Crushing/pinch points/overhead hazards/electrocution	<input type="checkbox"/>	FLD22 - Earth Moving Equipment
Moving mech. parts	Overhead hazards/electrocution	<input type="checkbox"/>	FLD23 - Cranes, Rigging, and Slings
Working at elevation	Overhead hazards/falls/electrocution	<input type="checkbox"/>	FLD24 - Aerial Lifts/Man lifts
Working at elevation	Overhead hazards/falls/electrocution	<input type="checkbox"/>	FLD25 - Working at Elevation
Working at elevation	Overhead hazards/falls/electrocution/slips	<input type="checkbox"/>	FLD26 - Ladders
Working at elevation	Slips/trips/falls/overhead hazards	<input type="checkbox"/>	FLD27 - Scaffolding
Trench cave-in	Crushing/falling/overhead hazards/suffocation	<input type="checkbox"/>	FLD28 - Excavating/Trenching
Physiochemical	Explosions/fires from oxidizing, flam./corr. Material	<input checked="" type="checkbox"/>	FLD30 - Hazardous Materials Use/Storage
Physiochemical	Fire and explosion	<input type="checkbox"/>	FLD31 - Fire Prevention/Response Plan Required
Physiochemical	Fire	<input checked="" type="checkbox"/>	FLD32 - Fire Extinguishers Required
Structural integrity	Overhead/electrocution/slips/trips/falls/fire	<input type="checkbox"/>	FLD33 - Demolition
Electrical	Electrocution/shock/thermal burns	<input checked="" type="checkbox"/>	FLD34 - Utilities
Electrical	Electrocution/shock/thermal burns	<input type="checkbox"/>	FLD35 - Electrical Safety
Burns/fires	Heat stress/fires/burns	<input type="checkbox"/>	FLD36 - Welding/Cutting/Brazing/Radiography
Impact/thermal	Thermal burns/high pressure impaction/heat stress	<input type="checkbox"/>	FLD37 - Pressure Washers/Sand Blasting
Impaction/electrical	Smashing body parts/pinching/cuts/electrocution	<input checked="" type="checkbox"/>	FLD38 - Hand and Power Tools
Poor visibility	Slips/trips/falls	<input type="checkbox"/>	FLD39 - Illumination
Fire/explosion	Burns/impaction	<input type="checkbox"/>	FLD40 - Storage Tank Removal/Decommissioning
Communications	Disruption of communications	<input checked="" type="checkbox"/>	FLD41 - Std. Hand/Emergency Signals
Energy/release	Unexpected release of energy	<input type="checkbox"/>	FLD42 - Lockout/Tag-out
Biological Hazards	Biological Hazards at site	<input checked="" type="checkbox"/>	FLD43 - Biological Hazards
Biological Hazards/BBP	Biological Hazards/BBP at site/First Aid Providers	<input checked="" type="checkbox"/>	FLD44 - Biological Hazards - Bloodborne Pathogens Exposure Control Plan - First Aid Providers
Infectious Waste	Infectious Waste at site/BBP/ at site/Infectious Waste	<input type="checkbox"/>	FLD45 - Biological Hazards - Bloodborne Pathogens Exposure Control Plan - Work With Infectious Waste
Lead Contaminated sites	Lead poisoning	<input checked="" type="checkbox"/>	FLD46 - Control of Exposure to Lead
Puncture/cuts	Cuts/ dismemberment/gouges	<input type="checkbox"/>	FLD47 - Clearing, Grubbing and Logging Operations

HEALTH AND SAFETY EVALUATION (Continued)

WESTON FLDs - Maintained on FSO's/PTL's Computer (Continued)

Physical Hazard Condition	Physical Hazard	Attach OP	WESTON OP Titles
Not applicable	Not applicable	<input checked="" type="checkbox"/>	FLD48 – Federal, State, Local Regulatory Agency Inspections
Not applicable	Exposure to hazardous materials/waste	<input checked="" type="checkbox"/>	FLD49 – Safe Storage of Samples
Cadmium	Exposure Control	<input checked="" type="checkbox"/>	FLD50 – Cadmium Exposure Control Plan
Process Safety Procedure	Safety Procedure	<input type="checkbox"/>	FLD51 – Process Safety Procedure
Asbestos	Asbestos Exposure	<input type="checkbox"/>	FLD52 – Asbestos Exposure Control Plan
Hexavalent Chromium	Exposure Control Plan	<input checked="" type="checkbox"/>	FLD53 – Hexavalent Chromium Exposure Control Plan
Benzene	Exposure Control Plan	<input type="checkbox"/>	FLD54 - Benzene Exposure Control Plan
Hydrofluoric acid	Working with HF	<input type="checkbox"/>	FLD55 – Working with Hydrofluoric Acid
Moving drill rig parts	Crushing/pinch points/overhead hazards/electrocution	<input type="checkbox"/>	FLD56 – Drilling Safety
Vehicles/driving	Accidents,/fatigue/cell phone use	<input checked="" type="checkbox"/>	FLD 57 – Motor Vehicle Safety
Improper material handling	Back injury/crushing from load shifts/equipment/tools	<input type="checkbox"/>	FLD 58 – Drum Handling Operations
COC decontamination	COCs/slip, trip, and falls/waste generation/environmental compliance/PPE	<input checked="" type="checkbox"/>	FLD59 - Decontamination
Drilling hazards	Electrocution/overhead hazards/pinch points	<input type="checkbox"/>	Environmental Remediation Drilling Safety Guideline - 2005
Fatigue	Long work hours	<input checked="" type="checkbox"/>	FLD60 – Employee Duty Schedule
Benzene/Gasoline	Benzene exposure	<input type="checkbox"/>	FLD61 – Gasoline Contaminant Exposure

11. TASK-BY-TASK ASSESSMENTS

Task-By-Task Assessment (COMPLETE ONE SHEET FOR EACH TASK)	
TASK DESCRIPTION	
Task #1: Mobilize and demobilize to/from the site.	
EQUIPMENT REQUIRED/USED (Be specific, e.g., hand tools, heavy equipment, instruments, PPE)	
Steel toe boots Boot cover Ear plugs MultiRAE Pro Personal DataRam (PDR) Camera Eyewash	Log book First aid kit Nitrile gloves Fire Extinguisher Safety glass BBP kit Flashlights
POTENTIAL HAZARDS/RISKS	
Chemical	
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Chemical hazards should not pose a significant risk during this activity. Action levels and associated PPE should protect against identified chemical hazards.	
Physical	
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L What justifies risk level? Any facility traffic rules (i.e., speed limit, no cell phone use while driving, yield to heavy equipment, etc.) and signs will be followed. Good house-keeping procedures shall be used to mitigate physical hazards and prevent slips, trips, falls. Proper lifting techniques will be used. Heat stress and dehydration hazards will be minimized using established work/ rest regiment and mandatory water breaks.	
Biological	
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Exposure to biological hazards will be at a minimum in the area. Bug repellent shall be worn to minimize exposure to insects. Snake leggings will be worn in vegetation and any area suspicious of being a snake-habitat. Animals (stray dogs) could be present in the areas.	
RADIOLOGICAL	
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Exposure to UV rays of the sun can be reduced by proper clothing or sunblock. Any exposed skin should receive several coatings of sunblock to reduce UV exposure.	
LEVELS OF PROTECTION/JUSTIFICATION	
Modified Level D for this task. Level C will be required if Action Levels are exceeded.	
SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED	
FLDs - 02, 05, 06, 10, 11, 12, 13, 14, 20, 30, 32, 34, 38, 41, 43, 44, 57, 60	

11. TASK-BY-TASK ASSESSMENTS (Continued)

Task-By-Task Assessment (COMPLETE ONE SHEET FOR EACH TASK)	
TASK DESCRIPTION	
Task #2: Collection, review, and evaluation of site history, site operations, and site features (logbook documentation, photo documentation, & response manager/data management)	
EQUIPMENT REQUIRED/USED	
(Be specific, e.g., hand tools, heavy equipment, instruments, PPE)	
Steel toe boots Boot cover Ear plugs MultiRAE Pro Personal DataRam (PDR) Camera Eyewash	Log book First aid kit Nitrile gloves Fire Extinguisher Safety glass BBP kit Flashlights
POTENTIAL HAZARDS/RISKS	
Chemical	
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Potential for exposure to chemicals. Personnel could be in closer proximity to storage containers during this task. Action levels and associated PPE should protect against identified chemical hazards.	
Physical	
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Heat stress, dehydration, slip/trip/falls are the biggest hazards. Work will be conducted in Level D ppe unless action levels require differently. A proper work rest program should be established and increased fluid intake. Good housekeeping procedures shall be used to mitigate physical hazards and prevent slips, trips and fails. Other hazards could include weather, noise, and hand injury from tools or machinery.	
Biological	
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Exposure to biological hazards will be at a minimum in the area. Bug repellent shall be worn to minimize exposure to insects. Snake leggings will be worn in vegetation and any area suspicious of being a snake-habitat.	
RADIOLOGICAL	
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Exposure to UV rays of the sun can be reduced by proper clothing or sunblock. Any exposed skin should receive several coatings of sunblock to reduce UV exposure.	
LEVELS OF PROTECTION/JUSTIFICATION	
Potential for Level D PPE as the minimum PPE for this task, or Level C will be required if Action Levels are exceeded.	
SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED	
FLDs – 02, 05, 06, 10, 11, 12, 13, 14, 20, 30, 32, 34, 38, 41, 43, 44, 57, 60	

11. TASK-BY-TASK ASSESSMENTS (Continued)

Task-By-Task Assessment (COMPLETE ONE SHEET FOR EACH TASK)		
TASK DESCRIPTION		
Task #3: Collection of on-site soil samples and aqueous samples for site-related contaminants.		
EQUIPMENT REQUIRED/USED		
(Be specific, e.g., hand tools, heavy equipment, instruments, PPE)		
Steel toe boots Boot cover Ear plugs MultiRAE Pro Tyvek and/or Saranex suites Personal DataRam (PDR)	Log book First aid kit Nitrile gloves Fire Extinguisher Rubber Booties Safety glass	Flashlights Eyewash BBP kit Camera Duct tape
POTENTIAL HAZARDS/RISKS		
Chemical		
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L What justifies risk level? Action levels and associated PPE should protect against identified chemical hazards. Primary COC are metals. Aqueous samples will be collected from totes previously filled by SWS at the direction of the TCEQ. See Action Levels for air monitoring action levels and PPE response actions. Previous soil and aqueous samples are thought to represent the worst areas of contamination on the site. (Action levels are based on the analytical results are conservative)		
Physical		
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Contents of the totes may have pressurized or crystals may have formed in the material present. Heat stress, dehydration, slip/trip/falls are the biggest hazards. Sampling will be conducted in Level C PPE and collected by utilizing a coliwasa samplers to access the top of the totes. Good housekeeping procedures shall be used to mitigate physical hazards and prevent slips, trips and falls.		
Biological		
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L Exposure to biological hazards will be at a minimum in the area. Bug repellent shall be worn to minimize exposure to insects. Snake leggings will be worn in vegetation and any area suspicious of being a snake-habitat.		
RADIOLOGICAL		
<input checked="" type="checkbox"/> Hazard Present Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L What justifies risk level? Exposure to UV rays of the sun can be reduced by proper clothing or sunblock. Any exposed skin should receive several coatings of sunblock to reduce UV exposure.		
LEVELS OF PROTECTION/JUSTIFICATION		
Potential for Level D PPE as the minimum PPE for this task, or Level C-with Tyvek for soil and saranex for water will be required if Action Levels are exceeded.		
SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED		
FLDs - 02, 05, 06, 10, 11, 12, 13, 14, 20, 30, 32, 34, 38, 41, 43, 44, 46, 48, 49, 50, 53, 57, 59, 60		

11. TASK-BY-TASK ASSESSMENTS (Continued)

Task-By-Task Assessment (COMPLETE ONE SHEET FOR EACH TASK)	
TASK DESCRIPTION	
EQUIPMENT REQUIRED/USED	
(Be specific, e.g., hand tools, heavy equipment, instruments, PPE)	
POTENTIAL HAZARDS/RISKS	
Chemical	
<input type="checkbox"/> Hazard Present What justifies risk level?	Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
Physical	
<input type="checkbox"/> Hazard Present What justifies risk level?	Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
Biological	
<input type="checkbox"/> Hazard Present What justifies risk level?	Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
RADIOLOGICAL	
<input type="checkbox"/> Hazard Present What justifies risk level?	Risk Level: <input type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
LEVELS OF PROTECTION/JUSTIFICATION	
SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED	

12. DAILY SITE SAFETY BRIEFINGS/HAZARD COMMUNICATION (HAZCOM)

- All personnel shall be provided with an initial and daily site safety briefing to communicate the nature, level and degree of hazards expected on site.
 - The daily safety meeting should incorporate but may not be limited to: scope of work; weather conditions; physical, chemical, biological, and radiological hazards; define PPE and doffing/donning procedures and required locations, special precautions (ex. Allergic to bee stings, epi-pen located on the truck, personnel on site and their roles/responsibilities).
- All personnel will also receive briefings when significant changes in site conditions occur and the Health and Safety Plan will be revised accordingly.

13. COMMUNICATIONS

- General signals during respirator usage:
 - THUMBS UP – I’m OK/I Agree
 - THUMBS DOWN – I Don’t Agree
 - HANDS ACROSS THROAT – Out of Air/Trouble Breathing
 - GRAB HAND/ARM – Come with Me
 - HANDS ON HEAD – I Need Assistance
- Radio Communications
 - Working – Channel 1
 - Emergency – Channel 2
- Mobile Telephone(s) *(See page 1 and/or attach EPA START phone list)*

14. CONTINGENCIES & EMERGENCY CONTACTS

CONTINGENCIES		
Emergency Contacts and Phone Numbers		
Agency	Contact	Phone Number
WorkCare WESTON Medical Director	Dr. Peter Greaney	800.455.6155, ext. 114
WorkCare Delta Team	Eoin Greaney Paula Sandrock You will be able to reach a WorkCare employee during weekdays between the hours of 7:30 a.m. and 7:30 p.m. Eastern Time Zone	800-455-6155 extension 2219 (Team Delta). 800-455-6155 extension 403 (Eoin Greaney) If a member of Team Delta cannot be reached dial extension 2110 (Paula Sandrock).
WorkCare Incident Intervention Program	Occupational medical assistance with employee injuries and medical evaluation, 24 hours a day 7 days a week. An intake coordinator will take your information and direct you to the appropriate medical professional to address your concern.	888-449-7787
WESTON Health & Safety Manager (Corporate)	Herold Hannah	610-701-3024 (Office) 267-516-0274 (Cell)
WESTON EPA Region 6 START Health & Safety Officers	Sam Cheek	972.977.1579
Fire Department	Dallas FD	911
Police Department	Dallas PD	911
START FSO Cell Phone	Sean Gavlas	609-433-8434
START PTL Cell Phone	Jose Ojeda	619-417-3298
EPA OSC Cell Phone	William Rhotenberry	214-437-9804
Weston Equipment Store (RES)	Danny Newman	713.301.7702
Nearest Telephone		
Local Medical Emergency Facility(s)		
Name of Hospital: Methodist Dallas Medical Center		
Address: 1441 N Beckley Ave, Dallas, TX 75203		Phone No.: (214) 947-8100
Name of Contact: Emergency Room		Phone No.: (214) 947-8100

Type of Service: <input type="checkbox"/> Physical trauma only <input type="checkbox"/> Chemical exposure only <input checked="" type="checkbox"/> Physical trauma and chemical exposure <input checked="" type="checkbox"/> Available 24 hours	Route to Hospital: (See Attached)	Travel time from site: 21 min Distance to hospital: 9.2 mi Name/no. of 24-hr ambulance service: 911
Secondary or Specialty Service Provider		
Name of Hospital:		
Address:		Phone No.:
Name of Contact:		Phone No.:
CONTINGENCIES (Continued)		
Secondary or Specialty Service Provider (Continued)		
Type of Service: <input type="checkbox"/> Physical trauma only <input type="checkbox"/> Chemical exposure only <input checked="" type="checkbox"/> Physical trauma and chemical exposure <input checked="" type="checkbox"/> Available 24 hours	Route to Hospital (see attached):	Travel time from site: 18 min Distance to hospital: 9.5 mi Name/no. of 24-hr ambulance service: 911

Hospital Location Map and Directions Sources

1. Yahoo Maps- <http://maps.yahoo.com> ;
2. Google Maps- <http://google.com/maps> ;

15. DECONTAMINATION PROCEDURES

- ☒ Wet Decontamination:
 ☒ Soap/water ☐ Bleach/water:
☒ Dry Decontamination

The following decontamination stations should be set up in each decontamination zone:

- Segregated equipment drop
- Disposable glove, bootie, and coverall removal and segregation station
- Safety glasses and hard hat removal station
- Hand and face wash and rinse

If site conditions require upgrade to Level C, a station must be set up for respirator removal, respirator decontamination, and cartridge disposal.

☒ All investigative derived waste (IDW) generated will be placed in appropriate containers, labeled and stored on site for eventual disposal.

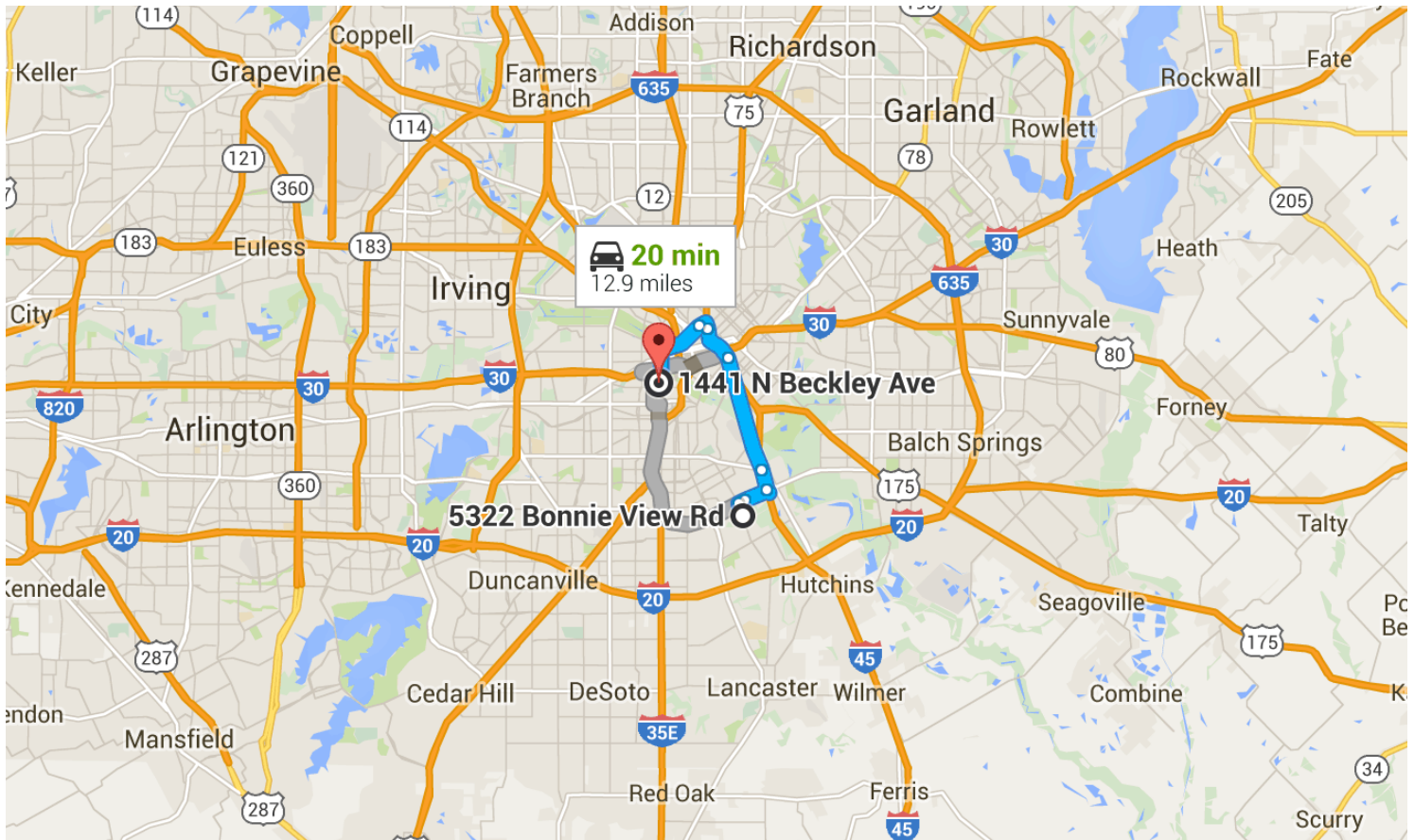
☐ Refer to Attachment A for additional Decontamination Procedures.

PPE Reference Web Links

1. MSA Response Respirator Selector - <http://msanet.com/response/chemicalsearch.asp>
2. MSA Cartridge Life Expectancy Calculator - <http://webapps.msanet.com/cartlife/>
3. Scott Respirator Selection - <http://www.scotthealthsafety.com/airpur.htm>
4. Kappler Suit Smart PPE Selector - http://www.kappler.com/techdata_main.html
5. DuPont™ SafeSPEC™ - <http://www2.dupont.com/NOWApp/DPPRequestGateway/>



Directions from 5322 Bonnie View Rd to 1441 N Beckley Ave



5322 Bonnie View Rd

Dallas, TX 75241

Get on I-45 N from S Great Trinity Forest Way

2.9 mi



Head north on Bonnie View Rd toward Cardiff St

0.5 mi



Turn right onto E Ledbetter Dr

0.3 mi



Continue onto S Great Trinity Forest Way

1.0 mi



Take the ramp to I-45 N/Dallas/Sherman

0.3 mi



Keep left at the fork and merge onto I-45 N

0.8 mi

Continue on I-45 N to N Beckley Ave

8.5 mi

**Merge onto I-45 N**

4.5 mi

**Keep left to continue on US-75 N**

1.4 mi

**Take exit 286A toward I-35 E/Denton**

0.6 mi

**Continue onto TX-366 Spur W**

2.0 mi

Continue on N Beckley Ave. Drive to Methodist Medical Center Private Dr

1.5 mi

**Turn left onto N Beckley Ave (signs for Singleton Blvd)**

1.1 mi

**Turn right onto W Greenbriar Ln**

0.2 mi

**Turn left onto Haines Ave**

341 ft

**Turn left onto Methodist Medical Center Private Dr**

0.1 mi

**Turn left at the 1st cross street to stay on Methodist Medical Center Private Dr**

151 ft

1441 N Beckley Ave

Dallas, TX 75203

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

16. SITE AIR MONITORING PROGRAM

Air Monitoring Instrument						
Instrument Selection and Initial Check Record						
Reporting Format: <input checked="" type="checkbox"/> Field Notebook <input type="checkbox"/> Field Data Sheets* <input type="checkbox"/> Air Monitoring Log <input type="checkbox"/> Trip Report <input type="checkbox"/> Other						
Instrument	Task No.(s)	Number Required	Number Received	Checked Upon Receipt	Comment	Initials
<input type="checkbox"/> RADIATION <input type="checkbox"/> GM (Pancake) <input type="checkbox"/> NaI (Micro R) <input type="checkbox"/> ZnS (Alpha Scintillator) <input type="checkbox"/> Other _____				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input checked="" type="checkbox"/> PID <input type="checkbox"/> MiniRAE (10.6 lamp) <input checked="" type="checkbox"/> MultiRAE (LEL/O2/H2S/CO/PID 10.6 lamp) <input type="checkbox"/> TVA 1000 (PID/FID) <input type="checkbox"/> Other _____	All	1 per team		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> FID <input type="checkbox"/> TVA 1000 (FID/PID) <input type="checkbox"/> Other				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Multiple Sensor Instruments <input type="checkbox"/> AreaRAE (LEL/O2/H2S/CO/PID 10.6 lamp) <input type="checkbox"/> MultiRAE (LEL/O2/PID 10.6 lamp/ Other: /) <input type="checkbox"/> AreaRAE (LEL/O2/PID 10.6 lamp / Other: /)				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input checked="" type="checkbox"/> PDR 1000 (Particulate) <input type="checkbox"/> Single Gas/ Vapor Monitor <input type="checkbox"/> DataRam	All	1 per team		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Single Gas Monitor Specify Chemical: _____				<input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Personal Sampling Pump Specify Media: _____				<input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Colorimetric tubes w/ pump Specify (MSA, Dräger, Sensidyne) <input type="checkbox"/> Tubes/type: _____				<input type="checkbox"/>		

Action Levels				
	Tasks	Action Level		Action
<input checked="" type="checkbox"/> Explosive atmosphere	All	Ambient Air Concentration	Confined Space Concentration	Safely evacuate area
		<10% LEL 10 to 25% LEL >25% LEL	0 to 1% LEL 1 to 10% LEL (5% LEL if alternate entry methods are used) >10% LEL (5% LEL if alternate entry methods are used).	Work may continue. Consider toxicity potential. Work may continue. Increase monitoring frequency. Work must stop. Leave the area or if in a confined space evacuate the space. Ventilate and test for acceptable conditions before returning to a confined space. Use initial site assessment air monitoring procedures for return to area in ambient air
<input checked="" type="checkbox"/> Oxygen	All	Ambient Air Concentration	Confined Space Concentration	Safely evacuate area
		<19.5% O ₂ 19.5% to 25% O ₂ >25% O ₂	<19.5% O ₂ 19.5% to 23.5% O ₂ >23.5% O ₂	Leave area. Re-enter only with self-contained breathing apparatus. Work may continue. Investigate changes from 21%. Work must stop. Ventilate area before returning.
<input checked="" type="checkbox"/> Radiation	All	< 3 times background 3 times background to < 1 mR/hour > 1 mR/hour		Continue work. Radiation above background levels (normally 0.01-0.02 mR/hr) signifies possible radiation source(s) present. Continue investigation with caution. Perform thorough monitoring. Consult with a Health Physicist. Potential radiation hazard. Evacuate site. Continue investigation only upon the advice of Health Physicist.
Toxic Substance Action levels = These Action Levels, if not defined by regulation, are some percent (usually 50%) of the applicable PEL/TLV/REL. That number must also be adjusted to account for instrument response factors.				
<input type="checkbox"/> Gases and vapors <u>Action Level formula</u> (1/2 PEL * RF)	All			Evacuate zone, upgrade PPE, apply engineering controls, and obtain COC specific instruments.
<input checked="" type="checkbox"/> Solids / Particulate (dust) hazards <u>Action Level Formula</u> (10^6 * PEL) / (Concentration * 2)	All	Cadmium soil concentration: 205 mg/kg Chromium soil concentration: 7580 mg/kg Lead soil concentration: 2000 mg/kg Mercury soil concentration: 46.4 mg/kg Action Level = 0.31 mg/m³		Evacuate zone, upgrade PPE, apply engineering controls, and obtain COC specific instruments.

17. SITE HEALTH AND SAFETY PLAN ACKNOWLEDGEMENT

Name (Printed)	Signature	Affiliation	Date

Disclaimer: This Health and Safety Plan (HASP) was prepared for work under the Superfund Technical Assessment and Response Team (START) Contract. Use of this HASP by WESTON and its subcontractors is intended to fulfill the OSHA requirements found in 29 CFR 1910.120. Items not specifically covered in this HASP are included by reference to 29 CFR 1910 and 1926.

Attachment A

DECONTAMINATION PLAN

(If applicable, include additional decontamination procedures,
e.g. Section 5 from Weston Corporate HASP)

GENERAL DECONTAMINATION PLAN
Personnel Decontamination
Consistent with the levels of protection required, step-by-step procedures for personnel decontamination for each level of protection are attached.
Levels of Protection Required for Decontamination Personnel
<p>The levels of protection required for personnel assisting with decontamination will be:</p> <p> <input type="checkbox"/> Level B <input checked="" type="checkbox"/> Level C <input checked="" type="checkbox"/> Level D </p> <p>Modifications include:</p> <p>Modified Level D with Nitrile gloves Safety glasses, Hard Hat, Steel-toe Boots</p>
Disposition of Decontamination Wastes
<p>Provide a description of waste disposition including identification of storage area, hauler, and final disposal site, if applicable</p> <p>All sampling activity waste will be kept onsite for future disposal.</p>
Equipment Decontamination
<p>A procedure for decontamination steps required for non-sampling equipment and heavy machinery follows:</p> <p>Nondisposable sampling equipment will be high-pressure washed or brushed to remove soil/sediment; nonphosphate detergent and potable water used; final potable water rinse; equipment air-dried.</p>
Sampling Equipment Decontamination
<p>Sampling equipment will be decontaminated in accordance with the following procedure:</p> <p>All disposable sampling equipment will be placed into disposal bins with waste stream from the site.</p>

LEVEL D DECONTAMINATION PLAN	
Check indicated functions or add steps, as necessary:	
Function	Description of Process, Solution, and Container
<input type="checkbox"/> Segregated equipment drop	
<input type="checkbox"/> Boot cover and glove wash	
<input type="checkbox"/> Boot cover and glove rinse	
<input type="checkbox"/> Tape removal - outer glove and boot	
<input type="checkbox"/> Boot cover removal	
<input type="checkbox"/> Outer glove removal	
HOTLINE	
<input type="checkbox"/> Suit/safety boot wash	
<input type="checkbox"/> Suit/boot/glove rinse	
<input type="checkbox"/> Safety boot removal	
<input type="checkbox"/> Suit removal	
<input type="checkbox"/> Inner glove wash	
<input type="checkbox"/> Inner glove rinse	
<input type="checkbox"/> Inner glove removal	
<input type="checkbox"/> Inner clothing removal	
CONTAMINATION REDUCTION ZONE (CRZ)/SAFE ZONE BOUNDARY	
<input type="checkbox"/> Field wash	
<input type="checkbox"/> Redress	
Disposal Plan, End of Day: EPA-ERRS will conduct all waste disposal activities.	
Disposal Plan, End of Week: EPA-ERRS will conduct all waste disposal activities.	
Disposal Plan, End of Project: EPA-ERRS will conduct all waste disposal activities.	

LEVEL C DECONTAMINATION PLAN	
Check indicated functions or add steps, as necessary:	
Function	Description of Process, Solution, and Container
<input type="checkbox"/> Segregated equipment drop	
<input type="checkbox"/> Boot cover and glove wash	
<input type="checkbox"/> Boot cover and glove rinse	
<input checked="" type="checkbox"/> Tape removal - outer glove and boot	
<input checked="" type="checkbox"/> Boot cover removal	
<input checked="" type="checkbox"/> Outer glove removal	
HOTLINE	
<input type="checkbox"/> Suit/safety boot wash	
<input type="checkbox"/> Suit/boot/glove rinse	
<input type="checkbox"/> Safety boot removal	
<input checked="" type="checkbox"/> Suit removal	
<input type="checkbox"/> Inner glove wash	
<input type="checkbox"/> Inner glove rinse	
<input checked="" type="checkbox"/> Facepiece removal	
<input checked="" type="checkbox"/> Inner glove removal	
<input type="checkbox"/> Inner clothing removal	
CONTAMINATION REDUCTION ZONE (CRZ)/SAFE ZONE BOUNDARY	
<input type="checkbox"/> Field wash	
<input checked="" type="checkbox"/> Redress	Removal of Tyvek and PPE at the CRZ area.
Disposal Plan, End of Day: EPA-ERRS will conduct all waste disposal activities.	
Disposal Plan, End of Week: EPA-ERRS will conduct all waste disposal activities.	
Disposal Plan, End of Project: EPA-ERRS will conduct all waste disposal activities.	

Attachment B
HAZCOM Program

SITE-SPECIFIC HAZARD COMMUNICATION PROGRAM

Location-Specific Hazard Communication Program/Checklist

To ensure an understanding of and compliance with the Hazard Communication Standard, WESTON will use this checklist/document (or similar document) in conjunction with the WESTON Written Hazard Communication Program as a means of meeting site- or location-specific requirements.

While responsibility for activities within this document reference the WESTON Safety Officer (SO), it is the responsibility of all personnel to effect compliance. Responsibilities under various conditions can be found within the WESTON Written Hazard Communication Program.

To ensure that information about the dangers of all hazardous chemicals used by WESTON are known by all affected employees, the following Hazard Communication Program has been established. All affected personnel will participate in the Hazard Communication Program. This written program, as well as WESTON's Corporate Hazard Communication Program, will be available for review by any employee, employee representative, and representative of OSHA, NIOSH, or any affected employer/employee on a multi-employer site.

☒ Site or other location name/address: Lane Plating Works

☒ Site/Project/Location Manager: Jose Ojeda

☒ Site/Location Safety Officer: Sean Gavlas

☒ List of chemicals compiled, format: ☒ HASP ☐ Other: _____

☒ Location of SDS files: HASP

☒ Training conducted by: Name: Jose Ojeda Date: 04/12/2016

☒ Indicate format of training documentation: ☒ Field Log: ☒ Other: EHS Trac

☐ Client briefing conducted regarding hazard communication: _____

☒ If multi-employer site (client, subcontractor, agency, etc.), indicate name of affected companies:
EPA, EPA-START

☐ Other employer(s) notified of chemicals, labeling, and SDS information: _____

☐ Has WESTON been notified of other employer's or client's hazard communication program(s), as necessary?
☐ Yes ☐ No

List of Hazardous Chemicals

A list of known hazardous chemicals used by WESTON personnel must be prepared and attached to this document or placed in a centrally identified location with the SDSs. Further information on each chemical may be obtained by reviewing the appropriate SDS. The list will be arranged to enable cross-reference with the SDS file and the label on the container. The SO or Location Manager is responsible for ensuring the chemical listing remains up-to-date.

Container Labeling

The WESTON SO will verify that all containers received from the chemical manufacturer, importer, or distributor for use on-site are clearly labeled.

The SO is responsible for ensuring that labels are placed where required and for comparing SDSs and other information with label information to ensure correctness.

Material Safety Data Sheets (SDSs)

The SO is responsible for establishing and monitoring WESTON's SDS program for the location. The SO will ensure that procedures are developed to obtain the necessary SDSs and will review incoming SDSs for new or significant health and safety information. He/she will see that any new information is passed on to the affected employees. If an SDS is not received at the time of initial shipment, the SO will call the manufacturer and have an SDS delivered for that product in accordance with the requirements of WESTON's Written Hazard Communication Program.

A log for, and copies of, SDSs for all hazardous chemicals in use will be kept in the SDS folder at a location known to all site workers. SDSs will be readily available to all employees during each work shift. If an SDS is not available, immediately contact the WESTON SO or the designated alternate. When a revised SDS is received, the SO will immediately replace the old SDS.

Employee Training and Information

The SO is responsible for the WESTON site-specific personnel training program. The SO will ensure that all program elements specified below are supplied to all affected employees.

At the time of initial assignment for employees to the work site, or whenever a new hazard is introduced into the work area, employees will attend a health and safety meeting or briefing that includes the information indicated below.

- Hazardous chemicals present at the work site.
- Physical and health risks of the hazardous chemicals.
- The signs and symptoms of overexposure.
- Procedures to follow if employees are overexposed to hazardous chemicals.
- Location of the SDS file and Written Hazard Communication Program.
- How to determine the presence or release of hazardous chemicals in the employee's work area.
- How to read labels and review SDSs to obtain hazard information.
- Steps WESTON has taken to reduce or prevent exposure to hazardous chemicals.
- How to reduce or prevent exposure to hazardous chemicals through the use of controls procedures, work practices, and personal protective equipment.
- Hazardous, non-routine tasks to be performed (if any).
- Chemicals within unlabeled piping (if any).

Hazardous Non-routine Tasks

When employees are required to perform hazardous non-routine tasks, the affected employee(s) will be given information by the SO about the hazardous chemicals he or she may use during such activity. This information will include specific chemical hazards, protective and safety measures the employee can use, and steps WESTON is using to reduce the hazards. These steps include, but are not limited to, ventilation, respirators, presence of another employee, and emergency procedures.

Chemicals in Unlabeled Pipes

Work activities may be performed by employees in areas where chemicals are transferred through unlabeled pipes. Prior to starting work in these areas, the employee will contact the SO, at which time information as to the chemical(s) in the pipes, potential hazards of the chemicals or the process involved, and the safety precautions that should be taken will be determined and presented.

Multi-Employer Work Sites

It is the responsibility of the SO to provide other employers with information about hazardous chemicals imported by WESTON to which their employees may be exposed, along with suggested safety precautions. It is also the responsibility of the SO and the Site Manager to obtain information about hazardous chemicals used by other employers to which WESTON employees may be exposed. WESTON's chemical listing will be made available to other employers, as requested. SDSs will be available for viewing, as necessary.

The location, format, and/or procedures for accessing SDS information must be relayed to affected employees.

Attachment C
Air Monitoring Logs and Calibration Records

Date: ____/____/____

Collected by: _____

Please specify where air monitoring data will be documented: ☐ Field Notebook ☐ Field Data Sheets ☐

Air Monitoring Log ☐ Trip Report ☐ Other _____

Station Location	Multi-RAE	Micro FID	Radiation Meter	DataRAM or PDR	Lumex MVA	Other	Other
Background Readings	____%LEL ____%O ₂ ____ppm CO ____ppm H ₂ S ____ppm VOC	____ppm	____μR/hr ____mR/hr ____CPM	____μg/m ³ or ____mg/m ³	____ng/m ³		
	____%LEL ____%O ₂ ____ppm CO ____ppm H ₂ S ____ppm VOC	____ppm	____μR/hr ____mR/hr ____CPM	____μg/m ³ or ____mg/m ³	____ng/m ³		
	____%LEL ____%O ₂ ____ppm CO ____ppm H ₂ S ____ppm VOC	____ppm	____μR/hr ____mR/hr ____CPM	____μg/m ³ or ____mg/m ³	____ng/m ³		
	____%LEL ____%O ₂ ____ppm CO ____ppm H ₂ S ____ppm VOC	____ppm	____μR/hr ____mR/hr ____CPM	____μg/m ³ or ____mg/m ³	____ng/m ³		
	____%LEL ____%O ₂ ____ppm CO ____ppm H ₂ S ____ppm VOC	____ppm	____μR/hr ____mR/hr ____CPM	____μg/m ³ or ____mg/m ³	____ng/m ³		

Attachment D
BBS Field Review Form

Site Name: _____ WO #: _____
 Location: _____ Date: _____ Field Activities Began: _____

Name of Designated, Qualified Field Safety Officer On-Site: _____

DESCRIPTION OF FIELD ACTIVITIES: Check one

- ☐ Drilling/Soil Sampling ☐ Groundwater Sampling ☐ Air Sampling ☐ IH Sampling
☐ Test Pits/Trenching ☐ UST Removal ☐ Remediation ☐ Vertical Construction
☐ Demolition ☐ Fuels ☐ MEC\UXO\DMM ☐ Recon
☐ Other: _____

BEHAVIOR-BASED SAFETY (BBS) PROGRAM ELEMENTS

Item No.	Yes	No	Element
1			All WESTON personnel on-site have received BBS orientation.
2			Weston's "Safety Vision" has been communicated to all project team members.
3a			Project has SMART safety goals. <input type="checkbox"/> Field activities <input type="checkbox"/> Vehicle safety <input type="checkbox"/> Other <div style="float: right;">If yes, list:</div>
3b			SMART goals are documented and communicated to field team, including contractors.
4			The client has a BBS program to which Weston must adhere.
5			Baseline safety data exists for the scheduled work tasks/activities.
6			Targeted behaviors are identified for observation during the field audit. <div style="float: right;">If yes, list:</div>
7			Health and Safety Plan (HASP) posted on-site and orientation given to each person.
8			Initial HASP meeting held and documented before work began.
9			Daily EHS briefings identify the day's tasks and related potential unsafe behaviors.
10			Daily EHS briefings are interactive.
11			Daily EHS Meetings are conducted by: <input type="checkbox"/> SM <input type="checkbox"/> FSO <input type="checkbox"/> Other (Identify): _____
12			Site personnel are provided with additional training or support to complete tasks safely.
13			Question and answer time is available to all site personnel.
14			A formal observation program is in place (client-specific). Observations are documented. If yes, observations are performed by: _____
15			An informal observation program is in place. Observations are documented. If yes, observations are performed by: _____ Type: <input type="checkbox"/> Targeted behavior checklist – corporate <input type="checkbox"/> Site-specific <input type="checkbox"/> Observed actively caring behaviors
16			Feedback mechanisms are in place. <div style="float: right;">If yes, identify mechanisms:</div>
17			The field team leader or designee recognizes and corrects unsafe behaviors in the field.
18			The field team leader shows commitment to the Actively Caring concept and encouragement of Actively Caring behaviors among team members.
19a			The Short Service Employee (SSE) Policy is followed for anyone with Weston for 6 months or less or in current position for 6 months or less.
19b			A mentor is assigned to the SSE.
19c			The SSE is designated through use of: _____ (e.g., specific colored hat, badge/sticker)

BEHAVIOR-BASED SAFETY (BBS) PROGRAM ELEMENTS (Continued)

Item No.	Yes	No	Element
19d			Site team consists of minimum number of SSEs.
Comments/Additional Information – Best Practices Observed:			

CERTIFICATION OF PERSONNEL

Item No.	Yes	No	Element
1a			Site is subject to HAZWOPER Regulations
1b			If yes, all personnel on-site have current HAZWOPER training.
1c			If (1a) is yes, all personnel on-site have current HAZWOPER medical.
2			Site requires respirator use. If yes, all personnel on site are: <input type="checkbox"/> medically qualified for respirator use <input type="checkbox"/> trained for respirator use <input type="checkbox"/> fit-tested for respirators to be used
3a			Site/client requires other standard specific medical certification. If yes, specify requirement(s):
3b			Site/client requires substance-specific medical. If yes, list substance(s):
3c			Site/client requires drug and alcohol testing.
3d			Physical capability medical required. If yes, indicate type: <input type="checkbox"/> General physical capability <input type="checkbox"/> Equipment/vehicle operation <input type="checkbox"/> Other: _____
4			Site requires special supervisor training and/or certification. If yes, check requirement: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> HAZWOPER supervisor training <input type="checkbox"/> Construction 30 hour course <input type="checkbox"/> Construction site manager's safety course </div> <div> <input type="checkbox"/> Asbestos abatement <input type="checkbox"/> Lead Abatement <input type="checkbox"/> Competent person. List type(s): <input type="checkbox"/> Qualified person. List type(s): </div> </div>
Comments/Additional Information:			

MEDICAL AND FIRST AID

Item No.	Yes	No	Element
1			First-aid kits accessible and identified.
2			Emergency eye/safety washes available. <input type="checkbox"/> ANSI compliance required.
3			First-aid kits and eyewash capabilities inspected weekly and documented (for site projects greater than 1 week in duration).
4			At least two first-aid/CPR-trained persons are on-site at all times when working.
Comments/Additional Information:			

EMERGENCY ACTION PLANS

Item No.	Yes	No	Element
1			Emergency Action Plan (EAP) posted on-site.
2			EAP orientation provided.
3			Emergency telephone numbers posted.

EMERGENCY ACTION PLANS (Continued)

Item No.	Yes	No	Element
4			Emergency routes posted. <input type="checkbox"/> Map <input type="checkbox"/> Written Directions.
5			Emergency plan and signals reviewed with all persons.
Comments/Additional Information:			

HAZARD COMMUNICATION

Item No.	Yes	No	Element
1			A site-specific HAZCOM Plan is in effect and up to date.
2			A chemical inventory and SDSs are available. Where?
3			Employees trained in the HAZCOM Plan and chemical hazards.
4			100% compliance with HAZCOM observed.
5			Coaching on HAZCOM observed.
Comments/Additional Information:			

PERSONAL PROTECTION

Item No.	Yes	No	Element
1			PPE Plan has been verified by a Qualified person.
2			All PPE meets applicable ANSI/OSHA/EPA criteria.
3			Hard hat, eye, hearing, foot and other PPE areas are defined and signs in place.
4			Levels of protection (LOP) are established.
5			Site control zones (Exclusion, CRZ, Support) are indicated clearly.
6			All employees know their LOP scheme.
7			OSHA respirator program in place.
8			Employees fit tested: <input type="checkbox"/> QLFT <input type="checkbox"/> QNFT <input type="checkbox"/> On-site <input type="checkbox"/> Current
9			PPE inspected and checked before use.
10			PPE stored properly.
11			Defective equipment tagged out.
12			Sufficient quantities of equipment available.
13			Monitoring Instruments Plan in place and communicated.
14			Instruments maintained and calibrated.
15			Maintenance & Calibration logs up to date.
16			Flotation devices worn when working on or over water.
17			PPE use 100% safe.
18			PPE coaching observed.
Comments/Additional Information:			

DECONTAMINATION

Item No.	Yes	No	Element
1			Decontamination system set up on-site.
2			Decontamination system used according to safety plan.

DECONTAMINATION (Continued)

Item No.	Yes	No	Element
3			Contamination reduction corridor clearly delineated in the CRZ.
4			Appropriate waste receptacles available for all waste.
5			Receptacles properly closed at end of day.
6			All decon liquids properly contained and disposed.
7			All wastes disposed of according to approved plan.
8			All personnel received decontamination training.
9			All reusable personal protective gear deconned and disinfected at least daily.
10			Decontamination process 100% followed.
11			Decontamination coaching observed.
Comments/Additional Information:			

HIGHWAY VEHICLE DRIVING

Item No.	Yes	No	Element
1			Highway vehicle driving addressed in HASP.
2			Highway vehicle driving regularly addressed in safety meetings.
3			Fatigue Management policy discussed with all site workers.
4			Hands-free cell phone use only.
5			All cell phone/radio use limited while driving.
6			100% safe driving observed.
7			Safe driving coaching observed.
8			Journey Management Plan in place.
Comments/Additional Information:			

WORKING AT ELEVATION

Item No.	Yes	No	Element
1			Ladders are used 100% safely.
2			Ladders used are appropriate for work performed.
3			Portable ladders are inspected before use.
4			Portable ladders are secured from falling.
5			Fixed ladders are inspected for structural integrity.
6			Coaching on ladder use observed.
7			Scaffolds are set up and dismantled under supervision of a competent person.
8			Scaffolding is inspected daily.
9			Scaffold inspections are documented.
10			All site personnel are trained to use scaffolding safely.
11			Scaffolding is used 100% safely.
12			Coaching on safe scaffold use observed.
13			Only qualified persons operate aerial or scissor lifts.
14			Personnel working at elevation in aerial or scissor lifts are protected from falling by fall limiting or arrest systems as required by regulation or manufacturers.
15			Aerial or scissor lifts are moved while workers are elevated only if permitted by manufacturers.

WORKING AT ELEVATION (Continued)

Item No.	Yes	No	Element
16			Travel routes for aerial or scissor lifts are inspected for impediments prior to moving.
17			Aerial and scissor lifts are inspected prior to each shift.
18			Aerial and scissor lifts are used 100% safely.
19			Coaching in safe use of aerial and scissor lifts observed.
20			The hierarchy of controls (elimination, substitution, engineering, administrative) is considered prior to performing work at elevation where reliance is placed on fall limiting or fall arresting system.
21			Fall prevention plans are developed by a competent person.
22			Horizontal lifelines are installed by qualified persons.
23			Fall prevention plans include plans for rescue.
24			Fall limiting and arrest equipment is inspected prior to use.
25			Fall limiting and arrest equipment is worn properly.
26			Anchor points are designed and used properly.
27			100% safe use of fall arrest and limiting systems.
28			Coaching is observed on use of fall arrest and limiting systems.
Comments/Additional Information:			

STRUCK-BY HAZARDS

Item No.	Yes	No	Element
1			Struck-by hazards are identified and addressed in the HASP.
2			Struck-by hazards are addressed in daily safety meetings.
3			High visibility vests are worn by all personnel working in areas where moving equipment is in use and along roadways.
4			A written Traffic Control Plan is implemented.
5			Operators and pedestrians are trained to gain eye contact before crossing vehicle travel ways.
6			Vehicles with blind spots are equipped with backup or motion alarms.
7			Qualified spotters are provided for vehicle backing in congested areas.
8			Qualified flaggers are provided where vehicle traffic enters or crosses public roadways.
9			Signs meeting requirements of the MUTCD are used to alert roadway users impacted by vehicles entering, crossing or leaving public roadways.
10			Site speed limits are posted and followed.
11			Traffic routes are established and followed in congested areas.
12			100% safe operation is observed.
13			Coaching for traffic safety is observed.
14			Materials which can fall from above or be blown are secured.
15			Exclusion zones are established around operations which can expel material or objects at velocity.
16			Personnel are not permitted under loads.
17			Personnel are not permitted to cross under conveyors unless guarding is provided.
18			Taglines are used for positioning elevated loads.
19			Lifting equipment operators know not to fly loads over site personnel.
20			Exclusion zones are established around masonry walls under construction or being demolished.
21			Preformed walls or lift slab concrete is secured during placement.

STRUCK-BY HAZARDS

Item No.	Yes	No	Element
22			Power tools designed to accommodate guards are equipped with functional guards.
23			When work is being performed overhead, tools not in use are secured or placed in holders.
24			The use of cranks on hand-powered winches or hoists is prohibited unless the hoists or winches are provided with positive self-locking dogs.
25			Hand wheels with exposed spokes, projecting pins, or knobs are not used.
26			Abrasive wheels are provided with safety guards.
27			Abrasive wheels for chop saws are chosen based on material to be cut.
28			Safety clips or retainers are installed and maintained on pneumatic impact tools to prevent dies and tools from being accidentally expelled from the barrel.
29			Safety lashings are provided at connections between tool and hose and at all quick makeup type connections.
30			Only qualified persons operate explosive-actuated tools.
31			Chain saws, torches or other power tools are not used to cut above shoulder height.
32			Powered nailers have a safety device on the muzzle to prevent the tool from ejecting fasteners unless the muzzle is in contact with the work surface.
33			Contact trip devices or triggers are not secured in an "on" position.
34			Workers using tools are positioned so work of one does not adversely affect others.
35			100% safe use of tools observed.
36			Coaching on tool use observed.
Comments/Additional Information:			

CAUGHT -IN HAZARDS

1			Caught-in hazards are identified and addressed in the HASP.
2			Caught-in hazards are addressed in daily safety meetings.
3			Pinch point, power drives, belts, etc. are guarded.
4			Lockout-Tagout (LOTO) used when performing maintenance.
5			All site personnel trained in LOTO Program.
6			100% Safe LOTO procedures observed.
7			Coaching on LOTO observed.
8			A competent person for excavation is on-site when excavation is performed.
9			Utility check performed, reconfirmed and documented before excavation or drilling per FLD 34.
10			At least one utility competent person is on-site.
11			Competent person determines appropriate protection to prevent excavation cave in.
12			Guardrails or fences placed around excavations near walkways or roads.
13			Excavation locations lighted/or otherwise made visible at night.
14			Ladders or ramps are provided to access and exit trenches more than 4 feet deep and within 25 ft of any entrance.
15			All excavated material, personnel, and heavy equipment are at least 24-inches from the edge of all trenches.
16			100% safe utility mark, excavation, and trenching observed
17			Coaching on safe utility mark, excavation and trenching observed.

CAUGHT -IN HAZARDS (Continued)

Item No.	Yes	No	Element
18			Confined space entry (CSE) permit procedure in place and communicated to all.
19			CSE permit procedure used: <input type="checkbox"/> Pre-entry review <input type="checkbox"/> Safety watch/attendant <input type="checkbox"/> Safety watch protected same as entrants <input type="checkbox"/> Retrieval system <input type="checkbox"/> Appropriate rescue available <input type="checkbox"/> Continuous monitoring for ___%O ₂ ___%LEL & TOX: _ _ _ _
20			CSE employee training documented.
21			100% safe CSE observed.
22			Coaching on CSE observed.
Comments/Additional Information:			

ELECTRICAL

Item No.	Yes	No	Element
1			Warning signs indicate the presence and location of high voltage equipment, 250 V or greater.
2			Qualified persons only permitted to work within 10 feet of any exposed live electrical conductors.
3			Electrical equipment and wiring properly guarded.
4			Electrical lines, extension cords, and cables guarded and properly maintained.
5			Extension cords kept dry out of puddles and rain.
6			Damaged equipment tagged out.
7			GFCIs used as appropriate.
8			Extension cords are rated for hard or extra hard outdoor use.
9			Underground electrical lines located and indicated per FLD 34.
10a			Arc flash assessments are performed as required.
10b			PPE for arc flash is provided.
10c			PPE for arc flash is appropriate.
11			100% safe electrical work observed.
12			Coaching on safe electrical work observed.
Comments/Additional Information:			

WALKING AND WORKING SURFACES

Item No.	Yes	No	Element
1			Access ways, stairs, ramps, and ladders free of ice, mud, snow, or debris
2			Mobile offices/labs have fixed stairs and handrails.
3			Work areas kept free of debris and equipment.
4			<i>Material in storage is protected from falling or collapse by effective stacking, blocking, cribbing, etc.</i>
5			<i>Walkways and aisles are kept clear.</i>

WALKING AND WORKING SURFACES (Continued)

Item No.	Yes	No	Element
6			<i>Materials are not stored on scaffolds or runways in excess of normal placement or in excess of safe load limits.</i>
7			<i>Work areas and means of access are maintained safe and orderly.</i>
8			<i>Tools, materials, extension cords, hoses or debris do not cause tripping or other hazards.</i>
9			<i>Storage and construction-sites are kept free from the accumulation of combustible materials.</i>
10			Waste materials and rubbish are placed in containers or, if appropriate, in piles.
11			Waste materials are disposed of in accord with applicable local, state, or federal requirements.
12			100% safe walking and working surfaces observed.
13			Coaching on safe walking and working surfaces observed.
Comments/Additional Information:			

MATERIAL HANDLING

Item No.	Yes	No	Element
1			Mechanical lifting is available and used whenever possible.
2			Employees are trained in and use safe lifting techniques.
3			Repetitive motion tasks are evaluated and addressed in the HASP.
4			Repetitive injury prevention is discussed during indoctrination.
5			Repetitive injury prevention is a regular topic at daily meetings.
6			100% material handling observed.
7			Coaching on safe material handling observed.
Comments/Additional Information:			

FIRE PREVENTION/PROTECTION

Item No.	Yes	No	Element
1a			Hot Work Checklists completed (FLD 36).
1b			If Hot Work Permit(s) required: <input type="checkbox"/> Permit(s) up to date. <input type="checkbox"/> Closed out permit(s) on file.
2			Smoking restricted to designated area.
3			Fire lanes established, clearly designated, and maintained.
4			Flammable/combustible liquid dispensing transfer systems grounded and bonded.
5			Proper flammable materials storage used.
6a			Fire alarm established.
6b			Workers aware of established fire alarm
7			Fire extinguisher(s) appropriately located.
8			Fire extinguisher(s) appropriate for fire hazard potential.
9			Location and use of fire extinguisher(s) known by all personnel.
10			Fire extinguisher(s) checked before each shift.
11			Fire extinguisher(s) inspected monthly.
12			Fire extinguisher(s) inspected yearly.
13			Combustible materials segregated from ignition sources.

FIRE PREVENTION/PROTECTION

Item No.	Yes	No	Element
14			Incompatibles segregated.
15			100% fire prevention/protection observed.
16			Coaching on fire prevention/protection observed.
Comments/Additional Information:			

MOTOR VEHICLES/HEAVY EQUIPMENT

Item No.	Yes	No	Element
1			Highway driving safety addressed in HASP.
2			Drivers assigned to vehicles based on experience and training.
3			Construction equipment inspected before each use. <input type="checkbox"/> Inspections documente. <input type="checkbox"/> Inspection documents on file.
4			Inspection issues identified are corrected.
5			Unsafe equipment tagged out and reported.
6			Certificates on site for operators of equipment requiring licenses or certifications.
7			All safety appliances/guards in place.
8			Equipment shut down for fueling.
9			Construction equipment has back-up alarms or spotters are used if 360° visibility restricted.
10			Loads are secure before transport.
11			Roads and structures inspected for load capacity per vehicle weights.
12			A Traffic Control Plan is in effect.
13			100% safe vehicle and equipment operation observed.
14			Coaching on safe vehicle and equipment operation observed.
Comments/Additional Information:			

HAND AND POWER TOOLS

Item No.	Yes	No	Element
1			Guards and safety devices in place and used.
2			Tools inspected before each use.
3			Tools tagged out, if defective.
4			Eye protection areas identified and protection worn.
5			Non-sparking tools available.
6			Coaching on safe tool operation observed.
Comments/Additional Information:			

WELDING AND CUTTING

Item No.	Yes	No	Element
1			Only qualified welders permitted.
2			Hot work permitting system in use.
3			Fire watch provided.

WELDING AND CUTTING

Item No.	Yes	No	Element
4			Equipment inspected before use.
5			Welding equipment properly grounded.
6			Appropriate PPE worn: <input type="checkbox"/> Proper helmets and shields (including proper tint for UV protection) <input type="checkbox"/> Leathers or other protection from sparks/slag
7			Air sampling/monitoring is performed to assess toxic fume exposure.
8			Adjacent workers protected from welding flash.
9			Oxidizers and fuel cylinders separated by 20 feet or ½ hour fire wall in storage.
10			Fuel cylinders secured in upright position.
11			Fire extinguishers present at all welding and cutting operations.
12			100% safe welding and cutting operations observed.
13			Coaching on welding and cutting observed.
Comments/Additional Information:			

ENVIRONMENTAL PROTECTION AND SUSTAINABILITY PLAN (EPSP)

Item No.	Yes	No	Element
1			Environmental Protection and Sustainability Plan posted.
2			EPSP reviewed as part of site indoctrination.
3			EPSP Checklist used to review Environmental Compliance.
4			100% environmental compliance observed.
5			Coaching on environmental compliance observed.
Comments/Additional Information:			

MISCELLANEOUS

Item No.	Yes	No	Element
1			Overhead hazards are noted, communicated to all, and labeled as needed.
2			For large construction projects, EHS Inspection (Checklist is used).
3			Copies of contracts with client and sub-contractors are on-site, WESTON's role regarding site health and safety responsibilities are clear in these, and site manager(s) understands.
4			Sub-contractors have received approved copies of their safety plan or have signified their intent to conform to Weston's safety plan.
5			Site managers understand their responsibilities for sub-contractors' conformance with all OSHA and other health and safety requirements
6			Site managers know what to do in the event of an OSHA/agency inspection
7			If warranted based on audit observations, a feedback session was provided to affected employees.
8			
9			
10			
Comments/Additional Information:			

COMMENTS/FEEDBACK PROVIDED:
